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RULE				

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/282,356 10/29/2002 PAT 7,169,182 which is a CIP of 10/256,160 09/26/2002 PAT 6,989,032  
which is a CIP of 10/175,417 06/19/2002 PAT 7,563,285  
which is a CIP of 10/151,280 05/20/2002 PAT 7,604,664  
which is a CIP of 09/970,479 10/04/2001 PAT 6,669,730  
and is a CIP of 10/140,153 05/07/2002 ABN  
and said 09/970,479 10/04/2001  
is a CIP of 09/968,046 10/01/2001 ABN  
and said 10/140,153 05/07/2002  
is a CIP of 09/970,479 10/04/2001 PAT 6,669,730  
and is a CIP of 10/128,619 04/23/2002 PAT 6,863,689  
which is a CIP of 09/906,119 07/16/2001 PAT 6,607,559  
and is a CIP of 09/982,148 10/18/2001 PAT 6,673,113

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/18/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 18	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature	Initials			

## ADDRESS

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## TITLE

INSTRUMENTATION FOR MANIPULATING ARTIFICIAL INTERVERTEBRAL DISC TRIALS HAVING A  
CYLINDRICAL ENGAGEMENT SURFACE

FILING FEE RECEIVED 685	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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